OAHU CANDIDATES-SUBMIT 1 ORIGINAL AND 1 COPY

NEIGHBOR ISLAND CANDIDATES-SUBMIT 1 ORIGINAL AND 2 COPIES

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION





PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES.") SECTION II-TYPE OF REPORT: SECTION I-CANDIDATE AND CANDIDATE COMMITTEE: (a) Candidate Name: (See the Schedule of Reporting Dates to complete this section) 1st Preliminary Primary riends of David Pasone Znd Preliminary Promary Final Primary (c) Mailing Address: BOX 135 REPORTING PERIOD Preliminary General Kealakekua. (d) Phone (Bus) Final Election Period July 13,206 through Sept. 24, 2006 Treasurer's Supplemental SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS (Complete Section IV on the Back of this Form Before Completing This Section) **COLUMN B COLUMN A ELECTION PERIOD** TOTAL TO DATE TOTAL THIS PERIOD Cash on Hand at the Beginning of the Election Period. Cash on Hand at the Beginning of this Reporting Period..... 2. Total Receipts (From Line 15)..... Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B)...... Total Disbursements (not including Unpaid Expenditures) (From Line 19)..... 901.91 901.91 Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4).... 3 000 Total Loans at the Closing of this Reporting Period..... Total Unpaid Expenditures at the Closing of this Reporting Period..... Debts Owed at the Closing of this Reporting Period (Add Lines 7 and 8)..... 10. Surplus/Deficit (Subtract Line 9 from Line 6)..... I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge. 9 24/06 Naveya C

¹ Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less.

Short form reporting requires completion of only Section II, Section III, and Section III of this Disclosure Report.

An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if a candidate is seeking nomination or election to a four-year office.

SECTION IV-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS (If Necessary, Complete Schedules A through E Before Completing This Section)

COLUMN A

COLUMN B

ELECTION PERIOD RECEIPTS **TOTAL THIS PERIOD** TOTAL TO DATE 11. Contributions From: (a) Individuals/Other Entities/Noncandidate Committees/Political Parties 11(a) Monetary and Non-Monetary Contributions of \$100 or Less..... 11(a)(i) Monetary and Non-Monetary Contributions of More Than \$100..... 11(a)(ii) Subtotal (Add Lines 11(a)(i) and 11(a)(ii)). 11(a)(iii) Candidate or Candidate's Immediate Family 1 T (b) Monetary and Non-Monetary Contributions of \$100 or Less..... (i) 11(b)(i) Monetary and Non-Monetary Contributions of More Than \$100..... 14(b)(ii) (iii) Subtotal (Add Lines 11(b)(i) and 11(b)(ii))..... 11(b)(iii) 12. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii)..... 12 13. Public Funds and Other Receipts..... 13 14. Loans.... 14 3,<u>000.</u> 15. Total Receipts (Add Lines 12 through 14)..... 15 DISBURSEMENTS 16. Expenditures..... 17. Loans Repaid or Forgiven..... 17 18. Unpaid Expenditures Paid or Forgiven..... 18 19. Subtotal Disbursements (Add Lines 16 through 18)..... 19 20. Unpaid Expenditures..... 20 21. Total Disbursements (Add Lines 19 and 20).....

CHECK ONLY ONE BOX USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES/POLITICAL PARTIES

X CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION



SCHEDULE A MONETARY AND NON-MONETARY CONTRIBUTIONS CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE CANDIDATE AND CANDIDATE COMMITTEE NAME: PAGE David FOR AGGREGATES OF \$1,000 OR MORE AMOUNT OF DATE OF FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR CONTRIBUTION OR DEPOSIT OR NAME OF EMPLOYER FAIR MARKET VALUE RECEIPT OF OF NON-MONETARY NON-MONETARY AGGREGATE CONTRIBUTION ELECTION PERIOD CONTRIBUTION IF A DEPENDENT MINOR, ENTER NAME OF PARENT OCCUPATION THIS PERIOD TOTAL TO DATE NON-MONETARY CONTRIBUTION N/A NONE NONE NONE NON-MONETARY CONTRIBUTION NON-MONE LARY CONTRIBUTION NON-MONETARY CONTRIBUTION NON-MONETARY CONTRIBUTION NON-MONETARY CONTRIBUTION SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page)..... NONE TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii))..... NONE

"ith the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on shedule B.

Form CC-5(A) (Rev. 5/99)

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

SCHEDULE B EXPENDITURES CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AN	ID CANDIDATE COMMITTEE NAME:	PAGE OI	F		
	Dava Basque				
DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD		
6/28/06	NON-MONETARY CONTRIBUTION	T-Shirts	727.67		
6/21/06	GP Roadway Solutions	Signs	2.00.00		
16/06	GP Roadway Solutions	Bumper stickens Banners	184. 37		
8128/06	Kona Printing: Graphics	Church. Bulletin	236.		
9101104	West Hawaii Today	Advertising	728.05		
4102	American Savings	NSF	22.		
	NON-MONETARY CONTRIBUTION				
1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page)					
SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page)					



SCHEDULE C PUBLIC FUNDS AND OTHER RECEIPTS CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AN	David Basque	PAGE	OF	CATAL E OF S CODE,
DATE OF DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF SOURCE OF PUBLIC FUNDS OR OTHER RECEIPT	DESCRIPTION OF OTHER RECEIPT	AMOUNT OF PUBLIC FUNDS OR OTHER RECEIPT THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	NOME	NONE	MONE	
		4		
	V	\checkmark		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
. TOTAL PUBLIC	PUBLIC FUNDS AND OTHER RECEIPTS THIS PERIOD (This P FUNDS AND OTHER RECEIPTS THIS PERIOD (Last Page Online Report)	v) (Transfer total to Line Number	NONE NONE	C- 5(C) (Rev. 5/99)

ATTACH A COPY OF THE EXECUTED LOAN DOCUMENT AT THE TIME OF INITIAL DISCLOSURE

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION



NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:		PAGE OF				
	David Basque		**************************************		PROPERTY OF THE PROPERTY OF TH	
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DATE OF LOAN	PURPOSE OF LOAN	BEGINNING OF THIS PERIOD	AMOUNT THIS PERIOD	OR FORGIVEN THIS PERIOD	CLOSING OF THIS PERIOD	
CANDIDATE REMEDIATE PAMILY FINANCIAL INSTITUTION OTHER	B: B Construction Spending Fund P.O. Box 135 Kewlahekun Hi.96750 Spending Fund.	1,000000 3,000	-0	PFORGIVEN	0	
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3. TOTAL LOANS REPAID OR FORGIVEN THIS PERIOD (Last Page Only) (Transfer total to Line Number 17 of the Disclosure Report)						
4. TOTAL LOANS AT THE CLOSING OF THIS PERIOD (Last Page Only) (Transfer total to Line Number 7 of the Disclosure Report)						



STATE OF HAWAII CAMPAIGN SPENDING COMMISSION



SCHEDULE E UNPAID EXPENDITURES CANDIDATE COMMITTEE

	OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON F				ERCIAL PURPOSE.
CANDIDATE AI	David Basque		PAGE	OF	
DATE OF	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF VENDOR	AMOUNT OF UNPAID EXPENDITURE AT	NEW UNPAID EXPENDIITURE	AMOUNT PAID	AMOUNT OF UNPAID
UNPAID EXPENDITURE	PURPOSE OF UNPAID EXPENDITURE	BEGINNING OF THIS PERIOD	AMOUNT THIS PERIOD	OR FORGIVEN THIS PERIOD	CLOSING OF THIS PERIOD
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LATE CONTRIBUTIONS REPORT CANDIDATE COMMITTEE

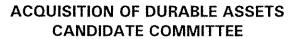
The Late Contributions Report is to be used to report all contributions aggregating more than \$500 that are received within the period of fifteen calendar days through four calendar days prior to a primary, special primary, general, or special general election. The report is required to be filed no later than 4:30 p.m., three calendar days prior to the election.

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR NAME OF EMPLOYER AMOUNT OF AGGREGATE DATE PURPOSE TO WHICH THE CONTRIBUTION WILL BE APPLIED OCCUPATION CONTRIBUTION CONTRIBUTION NONE NONE NONE NONE





NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:
David Basque

ACQUISITION OF ASSETS

The purchase or lease of an asset must also be reported as an "Expenditure" on Schedule B.

DATE OF ACQUISITION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF VENDOR OR DONOR	DESCRIPTION OF ASSET	ACQUISITION COST OR FAIR MARKET VALUE OF ASSET
	NONE	NONE	NONE
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DISPOSITION OF DURABLE ASSETS CANDIDATE COMMITTEE

NO INFORMATION OF	R COPIES FROM T	HE REPORTS SHALL	BE SOLD OR USED BY AN	Y PERSON FOR THE PUR	POSE OF SOLICITING CONT	RIBUTIONS OR FOI	R ANY COMME	RCIAL PURPOSE.
CANDIDATE AN	ID CANDIDAT	E COMMITTEE I				***************************************		
		David	Basque					
DISPOSITIO	ON OF AS	· · · · · · · · · · · · · · · · · · ·				***************************************	.,	
The sale of a	n asset mu	st also be re	ported as an "Ot	her Receipt" or	Schedule C.			
DATE OF DISPOSITION	FULL NAM	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF ENTITY ACQUIRING THE ASSET		DE DE	DESCRIPTION OF ASSET		SALE PRICE OR FAIR MARKET VALUE OF ASSET	
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